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which they may have a long and successful career. No class of women bring more joy and relief to those to whom they minister than the private nurse, who takes up efficiently the burden of one family after another:

Therefore, it is absolutely necessary, in order to make the best success of her life, that she continue strong physically, and become independent financially.

THE EARNING OF A BROAD BLACK BAND

BY MARION A. FULLER

Boston, Massachusetts

To most people, outside the medical profession, the word "nurse" brings a mental picture of a trim young woman in a neat, stiffly-starched uniform and cap carrying a tray or administering a medicine. Does this picture suggest one who has been trained by exceedingly hard and responsible work, long hours and tedious duty? Few outsiders have a chance to realize what the training of a nurse means.

From the very outset, the would-be nurse has been warned, by those who know, that the training is hard and most unpleasant duties have to be performed. Nurses tell her that she will spend most of her probationary time mopping floors and dusting. She is told of the severe discipline. She must obey to the letter; twenty-four hour duty is held up to her as an undesirable factor—and on the whole, the training is pictured as very trying—"All work and no play." "Of course," they say, "it is interesting but too hard for the average young woman. It takes an iron constitution to stand it."

But, "when the desire cometh, it shall be as a tree of life." So, despite the forewarnings, the girl who has the desire, is so filled with enthusiasm and determination that she enters her training, as a probationer. She wishes to discover for herself what the work is like.

She appears on her first morning, in her blue uniform, for inspection, and wonders if she will measure up to the requirements of neatness and severity. After passing inspection, she is sent to her assigned ward until a schedule of classes can be made out. What a sensation to be on a ward with nurses and patients. She has thought so long about training and here she actually is. A patient, seeing her pass, calls, "Nurse." Shall she turn and answer? Could he really mean her? How strange to be called nurse. How relieved she feels when she finds his want is only a glass of water instead of something she has never heard of. The doctor, with a hurried "good-morning," asks her for a

dressing. She goes, in bewilderment, to the head-nurse, who helps her out of this difficulty. She finds the head-nurse most cordial and smiles with joy, for she has expected to be ordered about, coldly. When at last the day is over, the first impression, at least, is a favorable one.

The practical work in the class-room begins next day—bed-making, baths, etc. What straight tight beds the class make and what severe criticism, this corner not straight, the drawsheet too loose. The demonstration and practice lessons are wonderful teachers. Who can ever forget standing before the class, beating a flaxseed poultice or splashing the dummy with cold water in the typhoid slush bath and expecting it to shiver and shake. A more thorough course in practical work could not be imagined.

The theoretical work is not to be overlooked. Previous to entering, most of the probationers take a course of study, consisting of anatomy, physiology, bacteriology, chemistry, hygiene and sanitation. The anatomy, physiology and bacteriology are continued, together with therapeutics, and the probationer must recite each morning. Preparation of these studies fill her "off-duty" time.

Thus pass the three months in actual experience, quite unlike the pictures drawn for her by her friends, although at times she has dusted and swept, almost beyond endurance. She has grown to know the hospital atmosphere and is well satisfied with her acquired knowledge. This makes her willing to attempt three years of it, if she is but given her cap.

The work of a capped nurse assumes a somewhat different aspect. She is over her probationary classes and, while she continues her class-work in medical and surgical lectures and quizzes, she is on the wards a great deal more than before. She is forced to assume considerable responsibility and is looked upon now as one of the nurses and not set apart as a "prob." Visiting physicians and surgeons, not knowing about her individually and not acquainted with her term of training, expect from her what they ask from nurses older in the service. If left alone on the ward, she is often obliged to make visits and chaperon examinations. Questions are asked her concerning the patients, which she is unable to answer, instruments are desired, with which she is as yet, unfamiliar. Let her count herself fortunate, who passes this stage with only a few humiliating experiences.

Not infrequently, the young nurse becomes very discouraged. There are days when it seems everything she does is criticised by someone. The supervisor does not like the appearance of her beds, she sends a patient to operation with false teeth in and rings on, which brings severe criticism from the head-nurse; the house-officer, weary

from a long day of operating speaks up quickly because she brings him the wrong solution to use in a dressing. Everything she does is wrong and yet she is trying her best to do right and look pleasant. Alas, why did she ever start to train? Time and again she asks herself this question, after a discouraging day.

But a wonderful change is brought about by a good night's rest. Out of bed at 6 a.m., she sleepily makes her hasty toilet and contrives to be at breakfast at 6.30. She is scarcely wide-awake when she seats herself at the breakfast table, with a sigh of relief that she is not one of those, who must wend their way to the supervisors' table with apologies. She forgets her troubles of yesterday when she remembers her morning reading from the Bible, "Remembering without ceasing your work of faith and labor of love."

Oh, what an opportunity the nurse has to show her love for a good work. Her troubles of the past grow dim and she thinks only of the work before her and the many needs of her patients.

Each nurse takes her turn in the diet kitchen, where the "special diets," "special orders" and "extra diets" are prepared. There are three nurses on duty here, the senior, junior and sub-junior. In her sub-junior days it is her work to count out the individual jellies and custards and "set up" the trays, with special diets for the wards. It is also her lot to "clean up" after her seniors. What a hopeless task—the sink piled with kettles and sauce-pans and three long tables to be cleared and scrubbed. Then, if ever, does the nurse get weary of scrubbing. It is now, rather than in her probationary days, that she scrubs and washes seemingly endless piles of dishes and kettles. Another joy of the "pup" is the potatoes each morning; fifty of them to be scrubbed and "eyed" ready for baking. One cannot help acquiring somewhat of a "boarding-house feeling" before the fifty potatoes are selected and scrubbed.

When she becomes junior, the work is more interesting and much more instructive, although considerably harder. She prepares the "special orders," perhaps fifteen in number, spaghetti for the Italian, who refuses to eat American foods, spinach, two orders as a medication for a patient with oxaluria, buttermilk for the babies with diarrhoea, bacon, ten slices, for a man who prefers it to meat. She prepares also the special diets, gastric ulcer, nephritis, colitis, constipation, low protein, carbohydrate, non-nitrogenous, fat-free, salt-free, obesity and weighed diabetic diets. For a mere diabetic salad, the cheese, olives, pimento, nuts and lettuce have to be calculated in calories and weighed in grams, before mixing. Even the cream and butter for this patient have to be weighed and marked. It is nothing short of a tragedy to

the painstaking junior, if she find another patient eating this special order.

The senior has charge of the extra diets for patients who need extra nourishment and, under the supervision of the dietitian, orders daily the materials used in the diet kitchen. The responsibility of the kitchen falls upon her. The dietitian and her two assistants are ready at all times to aid the nurses and suggest improvements in their work. They are often "first-aid," when a most delightful dessert fails to harden or when the salad dressing is entirely forgotten until the last moment.

The nurse leaves the diet kitchen, usually with a sigh of relief, but with a feeling that the six weeks spent there have given her invaluable experience.

The three weeks' vacation which comes to the nurse, after a year or more of duty, is indeed welcome. How delightful it is to feel free again, to be away from an institution in which one must live and work by the clock. Yet welcome as this feeling is, in a few days one begins to miss the hospital after all and to wonder now and again what is happening back there on the wards. The excitement, the rush and tear of the busiest moments, the constant watching of a dying patient, all comes back and with it a feeling akin to homesickness. And so at the end of the three weeks, it is not wholly with reluctance that the nurse returns to start another more interesting year.

She is pleased to find that she has been assigned to night duty. She has been looking forward with anticipation to this part of the training and is proud that she is now deemed able to fill such a responsible position. But this feeling is supplanted by one of fear when on her first night she sees the day nurses depart and realizes she is alone with twenty-one sick patients. She hurries about answering calls and carrying out the orders left by her head nurse. Filled with anxiety, she makes her rounds as frequently as possible and in the unaccustomed darkness, bends breathless over each sleeping form to reassure herself. How weird to be up all night! She hears the clock strike one, two, three, four. She moves about noiselessly, preparing for her morning's work and welcomes with joy the first break of day. Five o'clock, she starts work, douches, dressings, irrigations, enemata. She hastens from one thing to another with the utmost speed and wonders how she can possibly finish by seven. She manages, however, and thoroughly exhausted, gives her report to the head nurse on time.

On night duty a great deal is left to the common sense and judgment of one nurse. Only by good use of her ability and tact, can a nurse win for herself the commendation of her superiors. Every night superintendent appreciates a nurse who recognizes immediately the

weak slowly rising pulse of an internal hemorrhage. Every house-officer welcomes the coming of a night nurse whom he feels he can trust to give him an absolutely accurate and intelligent account of his patients' conditions. The nurse herself is gratified to know that she is meeting the demands made upon a night nurse in a busy ward and meeting them with success. She appreciates that she is gaining in this part of the work inestimable experience.

Occasionally, the nurse herself becomes a patient and has an opportunity to see the hospital from another point of view. She learns now what it means to wait twenty minutes for her glass of water. But she can realize, as other patients cannot, that the twenty minutes' wait is not due to indifference. As she lies there at night, she can sympathize with the patient who is waked by the midnight transfer and the arrival of an ether patient. She discovers too how much the thoughtfulness of a nurse means and decides that this bit of the training is well worth having.

In the operating room, if anywhere, the nurse feels like a probationer, for the work is entirely new. She studies her little book on suggestions, ligatures and sutures, needles and layouts, and wonders how others remember it all. She watches operations with the utmost concentration, hoping to get some clue to the system of the nurses' work. Headgear and face-guard on, she is shown how to prepare her hands, first eight minutes' scrubbing with soap and water and a stiff brush, then a two minute soak in alcohol. She takes her gown from the sterile table with greatest care. What if she should break her asepsis before the surgeons and older nurses! The operation begins; she takes her place at the back of the nurses' table and follows the orders of the nurse in charge. "Thread a medium Sims with No. 1 chromic catgut," the nurse whispers, as she leans over for a sponge. "A medium Sims, that is a cutting point, curved," she thinks. She finds her No. 1 chromic gut, threads the needle and puts it in the holder, ready for the nurse. The surgeon takes the stitch without comment. It must be right!

A nurse needs every virtue in the operating room. She must be calm, quick and observing, tactful, well-poised and abounding in common sense. The duty is a great tax, both on one's physical and mental abilities. Many long hours the nurse stands beside the operating table holding a retractor or keeping one arm in position, always ready with ties and stitches. In this state of extreme tension, the nurse forgets herself and her fatigue. She watches carefully the moves of the surgeon, anticipating as far as possible his every want. She follows the stages of the operation, and shares in some measure his satisfaction

as he removes successfully a gall-bladder filled with stones from a patient whose diagnosis he had made as cholelithiasis.

Happy is the operating nurse who receives from the surgeon an occasional word of praise, well-earned.

Finally comes graduation. On this night each senior appears in uniform with a wide black band on her cap and for one short evening is elated over the idea of being a graduate. Relations and friends are invited and the medical staff of the hospital. She listens to an address by some famous speaker and enjoys thoroughly the dancing which follows. Alas, this heaven is but for an evening! The next morning, she pockets her black band and as a pupil-nurse again goes on to complete her ten hundred and fifty-three days of duty.

It is plain to her now, as she looks back over her three years, why other nurses tried to dissuade her from entering, although they, themselves, claimed they loved the work. She is glad she did not take their advice. The many-sidedness of her training has furnished her a broad and firm foundation upon which to build her work in the world.

Even if, to the outsider, her uniform and black band present no other impression than that of an attractive costume, to those who understand, and to her, it represents knowledge and friendships which could be acquired in no other way.

PARASITES

By MARY CAROLINE TIBBITS

New York, N. Y.

Funk and Wagnall's dictionary defines parasite as "a living organism, either an animal or plant, that lives on or in some other organism from which it derives its nourishment for the whole or part of its existence."

Webster's *International*, defining "parasite" from a biological standpoint says, "a plant or animal living in, on or with some other living organism, at whose expense it obtains its food, shelter or some other advantage. Among animals the term commonly designates those living on other animals. Some are parasites throughout life, many others only during certain stages."

From the *Encyclopaedia Britannica* we learn that the term as applied to men originally conveyed no idea of reproach. In fact, a parasite was a person performing work peculiar to himself and of use either to the church or to the community. However, our modern conception of parasite seems to have signally changed, until we now seem naturally